## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/633,327

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EN	OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			34					RATE	FEE		RATE	FEE
			NUMBER F	u FD	NUMBER EXTRA			BASIC FEE	385.00	OR B	ASIC FEE	770.00
FOR						L		X\$ 9=		OR	X\$18=	252-
TOTAL CHARGEABLE CLAIMS 34 minus 20=					* ; }						X86=	2114
INDEPENDENT CLAIMS 7 minus 3 =					1 4	<u> </u>		X43=		OR	7,00-	277
MULTIPLE DEPENDENT CLAIM PRESENT							]	+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1366
CLAIMS AS AMENDED - PART II							1)	SMALL	ENTITY	OR	OTHER SMALL	THAN ENTITY
		(Column 1)		(Column 2) HIGHEST		Colditing	٦		ADDI-	1 [		ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1.15			+290=	
								+145=	ļ	OR	TOTA	
								ADDIT. FEE		<b>J</b> OH	ADDIT. FE	E <b>L</b>
		(Column 1)			umn 2)	(Column	3)		ADDI-	٦ .		ADDI-
AMENDMENT B		CLAIMS REMAINING AFTER	-	NL PRE	GHEST JMBER VIOUSLY JD FOR	PRESEN' EXTRA		RATE	TIONA FEE		RATE	TIONAL FEE
	Total	AMENDMEN'	Minus	**		=		X\$ 9=		OR	X\$18=	:
	Independent	*	Minus	***		=		X43=		OF	X86=	
		I ENTATION OF	MULTIPLE DE	PENDE	NT CLAII	И			+	7	200	
_								+145=		OF	` L	<u> </u>
								TOTA ADDIT. FE	E	OF	ADDIT. F	EEL
		(Column 1	)	(Co	olumn 2)	(Columr	1 31					1001
AMENDMENT C	`	CLAIMS REMAINING AFTER	3	PRI	IGHEST IUMBER EVIOUSLY AID FOR	PRESEI EXTR		RATE	ADDI TIONA FEE	\L	RATI	ADDI- TIONA FEE
		AMENDMEN	Minus	**	NIU I ON	=		X\$ 9=		OF	X\$18	:=
	Total Independent	*	Minus	***		=		X43=			Y86	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\ \	+	_ 0	<u> </u>	
	FIRST FILESCHARIOUS S. MICENIE Z. Z.							+145=		OI		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OI	R ADDIT.	TAL EE
	+ if the "Highest N		ly Paid For III	1110 01 7	(OL 13 1000		"3." iumbe	er found in the		e box ın		
1	The "Highest N	umber Previousi	Trailiron (100	,, o, iiiuoj	,	•						